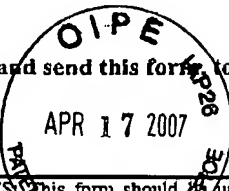


PART B - FEE(S) TRANSMITTAL - 4 pages total

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

29382 7590 01/19/2007

TROPIC NETWORKS INC.
 DR. VICTORIA DONNELLY
 135 MICHAEL COWPLAND DRIVE
 KANATA, ON K2M 2E9
 CANADA

04/18/2007 FMEIK12 00000024 10635561

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Victoria Donnelly	(Depositor's name)
<i>[Signature]</i>	(Signature)
April 17, 2007	(Date)

01 FC-1501	1400.00 OP			
02 FC-1502	300.00 OP			

10/635,561	08/07/2003	Derrick Remedios	TR-171-US	8590
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TITLE OF INVENTION: METHOD AND SYSTEM FOR SELECTIVE OPTICAL PAYLOAD CANCELLATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	XXXX NO	XXX \$1400	\$300	\$0	XXXXX \$1700	04/19/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
PASCAL, LESLIE C	2613	398-198000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Victoria Donnelly

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Tropic Networks Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Kanata, Ontario, CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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☒ Publication Fee (No small entity discount permitted)
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- ☐ A check is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

[Signature]

Date April 17, 2007

Typed or printed name

Victoria Donnelly

Registration No. 44,185

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